

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

09897552

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		17	<input type="text"/>
FOR		NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS		17 minus 20=	* -
INDEPENDENT CLAIMS		3 minus 3 =	* -
MULTIPLE DEPENDENT CLAIM PRESENT			<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

RATE	FEE	RATE	FEE
BASIC FEE	355.00	OR BASIC FEE	710.00
X\$ 9=	<input type="text"/>	OR X\$18=	<input type="text"/>
X40=	<input type="text"/>	X80=	<input type="text"/>
+135=	<input type="text"/>	+270=	<input type="text"/>
TOTAL	<input type="text"/>	TOTAL	710

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=	<input type="text"/>	X\$18=	<input type="text"/>
X40=	<input type="text"/>	X80=	<input type="text"/>
+135=	<input type="text"/>	+270=	<input type="text"/>
TOTAL ADDIT. FEE	<input type="text"/>	TOTAL ADDIT. FEE	<input type="text"/>

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=	<input type="text"/>	X\$18=	<input type="text"/>
X40=	<input type="text"/>	X80=	<input type="text"/>
+135=	<input type="text"/>	+270=	<input type="text"/>
TOTAL ADDIT. FEE	<input type="text"/>	TOTAL ADDIT. FEE	<input type="text"/>

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=	<input type="text"/>	X\$18=	<input type="text"/>
X40=	<input type="text"/>	X80=	<input type="text"/>
+135=	<input type="text"/>	+270=	<input type="text"/>
TOTAL ADDIT. FEE	<input type="text"/>	TOTAL ADDIT. FEE	<input type="text"/>

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.